



Town of Spencer
 90 N West Street
 Spencer, Indiana 47460
 Phone (812) 829-3213

Permit No.:

SOLICITORS APPLICATION FOR PERMIT

Fee: \$25.00

I. APPLICANT INFORMATION		
Name:		Phone No.: () -
Address:		
City:	State:	Zip:
Employer/Entity/Organization you are representing:		Phone No.:
Address:		
City:	State:	Zip:
Nature of the products or services offered:		
Proposed method of operation within the Town of Spencer:		
II. PERSON(S) AFFILIATED		
Please list all person(s) affiliated with your requested activities		
Name:		Attach a copy of picture I.D. here
Employers Name, Address, and Phone No., if different than above:		
Nature of products or services offered, if different than above:		
Signature of affiliated person:		
Name:		Attach a copy of picture I.D. here
Employers Name, Address, and Phone No., if different than above:		
Nature of products or services offered, if different than above:		
Signature of affiliated person:		

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PERSON(S) AFFILIATED CONT.	
Name:	Attach a copy of picture I.D. here
Employers Name, Address, and Phone No., if different than above:	
Nature of products or services offered, if different than above:	
Signature of affiliated person:	
Name:	Attach a copy of picture I.D. here
Employers Name, Address, and Phone No., if different than above:	
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Name:	Attach a copy of picture I.D. here
Employers Name, Address, and Phone No., if different than above:	
Nature of products or services offered, if different than above:	
Signature of affiliated person:	

Applicant Signature:		Date:
Printed Name:	Title:	